



101 4<sup>th</sup> Street East, Hastings, MN 55033 p. 651-480-2342 f. 651-437-1654 www.hastingsmn.gov

## **UTILITY DISCONNECTION VERIFICATION FORM**

## Provide the following information about the structure to be demolished or moved.

Proposed date of demolition or structure move			
Legal owner of property			_
Current address of struct	ure to be demolished	d or moved	
New lot address for struc	cture being moved		
Legal Description of the	property		
obtained from each of the No construction activity permit approval from the It is the responsibility of	or demolition work e Building Department the property owner d provide these orga	shall begin prior to tent of the City of Has	it, written approval shall be the completion of this form and stings. to obtain all the required dditional information deemed
Organization	<u>Signature</u>	<u>Date</u>	Comments
Minnegasco (nat/gas)			
Excel Energy			
Embarq Telephone _			
Hastings Utilities Dept.			
Please return this completed form to the Department of Building Safety, City of Hastings, 101 4 <sup>th</sup> St. East, Hastings MN. 55033-1955			